

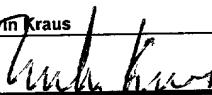
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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		<b>Attorney Docket No</b>	501,38330CX1	
		<b>First Inventor</b>	INOUE, MASAHIKO	
		<b>Title</b>	<b>SHAKING TEST APPARATUS AND METHOD FOR STRUCTURES</b>	
		<b>Express Mail Label No.</b>		
<b>APPLICATION ELEMENTS</b>  <i>SEE MPEP chapter 600 concerning utility patent application contents.</i>			<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification <b>[Total Pages: 26]</b> (preferred arrangement set forth below) -Descriptive title of the invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R &amp; D -Reference to sequence listing, a table, or a computer program listing appendix -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <b>[Total Pages: 7]</b></p> <p>5. Oath or Declaration <b>[Total Pages: 5]</b> a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) Named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</p> <p>6. <input type="checkbox"/> Application Data Sheet See 37 CFR 1.76</p> <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on i. <input type="checkbox"/> CD-ROM or CD-R (2 copies), or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies</p>				
<b>ACCOMPANYING APPLICATION PARTS</b>				
<p>9. <input type="checkbox"/> Assignment Papers (cover sheet &amp; documents(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input type="checkbox"/> Other _____</p>				
<p>18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:</p> <p><input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No. <b>09/526,207</b></p> <p>Prior application information: Examiner: <b>R. Miller</b> Group Art Unit: <b>2856</b></p> <p>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>				
<b>19. CORRESPONDENCE ADDRESS</b>				
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		020457 <small>(Insert Customer No. or Attach bar code label here)</small>		or <input type="checkbox"/> Correspondence address below
Name		ANTONELLI, TERRY, STOUT & KRAUS, LLP		
Address				
City		State		Zip Code
Country		Telephone	(703) 312-6600	Fax (703) 312-6666
Name	Registration No. (Attorney/Agent)			22,466
Signature				Date January 3, 2002

Burden Hour Statement. This form is estimated to take .2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

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<h1>FEE TRANSMITTAL for FY 2002</h1> <p><i>Patent fees are subject to annual revision.</i></p>		Complete if Known																																																																																																																																																																																																																														
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SUBMITTED BY		Complete (if applicable)			
Name (Print/Type)	Melvin Kraus	Registration No. (Attorney/Agent)	22,466	Telephone	(703)312-6600
Signature				Date	01/03/2002

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